

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number (if known): _____

Official Form 121**Statement About Your Social Security Numbers**

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Tell the Court About Yourself and Your spouse if Your Spouse is Filing With You

For Debtor 1:

For Debtor 2 (Only if Spouse Is Filing):

1. Your name

Melanie

First name

Ann

Middle name

Ondik

Last name

First name

Middle name

Last name

Part 2: Tell the Court About all of Your Social Security or Federal Individual Taxpayer Identification Numbers

2. All Social Security Numbers you have used

1 6 5 - 6 4 - 0 6 0 4☐ You do not have a Social Security number.

3. All federal Individual Taxpayer Identification Numbers (ITIN) you have used

9 _____ - _____ - _____

9 _____ - _____ - _____

☒ You do not have an ITIN.

_____ - _____ - _____

☐ You do not have a Social Security number.

9 _____ - _____ - _____

9 _____ - _____ - _____

☐ You do not have an ITIN.**Part 3: Sign Below**

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

x Melanie Ann Ondik
Melanie Ann Ondik, Debtor 1

Date 12/14/17
MM/DD/YYYY

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

x _____
Signature of Debtor 2

Date _____
MM/DD/YYYY